NO.466 P. 1

OFFICIAL Atty Docket No.: A5369/T40600

PTO FAX NO.:

(703) 872-9310

ATTENTION:

Examiner Sylvia Macarthur

Group Art Unit 1763

TELEPHONE NO .:

703-306-5690

## OFFICIAL COMMUNICATION

## FOR THE PERSONAL ATTENTION OF **EXAMINER SYLVIA MACARTHUR**

## CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following document(s) in re Application of YOUNES ACHKIRE et al., Application No. 09/729,128, filed December 1, 2000 for PRESSURIZED LIQUID DELIVERY MODULE are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

## Document(s) Attached

SB/21 Transmittal (1 page)

2. Response to Office Action & Restriction Requirement (8 pages)

3. Application Data Sheet (4 pages)

Number of pages being transmitted, including this page: 14

Dated: March 6, 2003

PLEASE CONFIRM RECEIPT OF THIS PAPER BY RETURN FACSIMILE AT (650) 326-2422

TOWNSEND and TOWNSEND and CREW LLP Two Embarcadero Center, 8th Floor San Francisco, CA 94111-3834 Telephone: 650-326-2400

Fax: 650-326-2422

PA 3289245 vl

14

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

		A D O Alexandra	00/700 400
TRANSMITTAL FORM (to be used for all correspondence after infital filing)		Application Number	09/729,128
		Filing Date	December 1, 2000
		First Named Inventor	Achkire, Younes
		Art Unit	1763
		Examiner Name	Sylvia Macarthur
otel Number of Pages in This Submission	1	Attorney Docket Number	A5369/T40600
	ENCLO	SURES (Check all that apply)	
☐ Fee Transmittal Form ☐ Drawin		g(s)	After Allowance Communication to Group
☐ Fee Attached ☐ Licens		ing-related Papers	Appeal Communication to Board of Appeals and Interferences
☑ Amendment / Reply		î .	Appeal Communication to Group (Appeal Notice, Brief, Roply Brief)
After Final	Petition to Convert to a Provisional Application  Power of Attorney, Revocation Change of Correspondence Address		Proprietary Information
Affidavits/declaration(s)			Status Letter
Extension of Time Request		nal Disclaimer	Other Enclosure(s) (please identify below):
Express Abandonment Request	Request for Refund  CD, Number of CD(s)		Application Data Sheet, Certification of Facsimile Transmission
☐ Information Disclosure Statement ☐ Certifled Copy of Priority ☐ Document(s) ☐ Response to Missing Parts/ Incomplete Application			
			authorized to charge any additional fees to 430.
		* * *	
Response to Missing Parts under 37 CFR 1.52 or 1.53			
SIGNA	TURE OF	APPLICANT, ATTORNEY, O	R AGENT
Firm Townsend and To		Crew LLP	
or Individual Kent J. Tobin	*	Reg. No	o. 39,496
Signature	2		
Date March 6, 2003			
	CE	RTIFICATE OF MAILING	
hereby certify that this correspondence 9310 on March 6, 2003.	s being facs	imile transmitted to the Patent and	d Trademark Office, Fax No. (703) 872-
	: •	·	- 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 194 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 194
Typed or printed name Krista K. Mer	rimac \		<u> </u>
Signature X 11	XXI	Wrinac	Date March 6, 2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademerk Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

PA 3289244 v1